

**TOWN OF WELLESLEY - BUILDING DEPARTMENT**  
**COMMERCIAL BUILDING PERMIT APPLICATION**  
**(Other Than One- or Two- Family Dwellings)**

PURSUANT TO MA STATE BUILDING CODE - 780 CMR

For Office Use Only

APP # 201204658

Date 11/26/12

**PLEASE COMPLETE ALL SECTIONS IN FULL**

**SECTION 1 - DESCRIPTION OF PROPOSED WORK - check all applicable**

New Construction <input type="checkbox"/>	Addition <input type="checkbox"/>	Alteration <input type="checkbox"/>	Repair <input type="checkbox"/>	Accessory Structure <input type="checkbox"/>	Demolition <input checked="" type="checkbox"/>
Swimming Pool <input type="checkbox"/>	Fence <input type="checkbox"/>	Other <input type="checkbox"/>	Please Specify _____		
Description of Proposed Construction / Scope of Work <u>REMOVE CANOPY OVER GAS PUMPS</u>				Sewage Disposal System Municipal <input type="checkbox"/> Private <input checked="" type="checkbox"/>	
				Water Supply (M.G.L. c. 40, § 54) Municipal <input checked="" type="checkbox"/> Private <input type="checkbox"/>	

**SECTION 2 - PROPERTY ADDRESS & OWNERSHIP**

<b>2.1 Property Address (Number and Street)</b> <u>199 WORCESTER ST. WELLESLEY MA 02481</u>	<b>2.2 Unit / Suite</b> 
<b>2.3 Business Name (if applicable)</b> <u>PATRIOT PETROLEUM</u>	
<b>2.4 Property Owner of Record</b> Name (Print) <u>MEDAGLIA FAMILY WELLESLEY REALTY TRUST</u> ; Mailing Address <u>TOM MEDAGLIA 700 QUINOBEGUIN, WARREN MA</u> <u>(617) 784-6666</u> Telephone _____ If new owner, Book / Page and Date title recorded _____	

**SECTION 3 - CONSTRUCTION SERVICES --- For projects less than 35,000 cubic feet of enclosed space.**

<b>3.1 Licensed Construction Supervisor</b> Name (Print) <u>PETER C. BANKS</u> Address <u>554 WINTER ST. WALPOLE MA 02081</u> Telephone <u>508.384.5777 x121</u> Cell <u>617-592-8608</u> License Number <u>CS 67772</u> Expiration Date <u>11/21/2013</u> Wellesley Registration Number (CID) <u>113913</u>	
<b>3.2 Registered Home Improvement Contractor</b> Company Name _____ Address _____ Telephone _____ Cell _____ Registration Number _____ Expiration Date _____ Wellesley Registration Number (CID) _____ <div style="text-align: center; border: 1px solid black; padding: 5px; margin: 10px auto; width: 150px;">NOV 26 2012</div>	

**SECTION 4 - PROFESSIONAL DESIGN AND CONSTRUCTION SERVICES --- For buildings and structures subject to construction control pursuant to 780 CMR 116 (containing more than 35,000 c.f. of enclosed space).**

**4.1 Primary Registered Design Professional --- Please include names and contact information for ALL Registered Architects and Registered Professional Engineers on required construction documents.**

Name (Print) _____	Registration Number _____
Address _____	Expiration Date _____
Telephone _____ Cell _____	Wellesley Registration Number (CID) _____

**4.2 General Contractor**

Responsible In Charge of Construction <u>PETER C. BANKS</u>	Wellesley Registration Number (CID) <u>113913</u>
Company Name <u>CEI BOSTON LLC</u>	Telephone <u>508.384.5777 x121</u>
Address <u>15 SHIRE DR. NORFOLK, MA 02056</u>	Cell <u>617.592.8608</u>

**SECTION 5 - WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152, § 25C(6)) - Workers Compensation Insurance affidavit must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of the issuance of a building permit.**

**SECTION 6 - ZONING COMPLIANCE / SITE PLAN ---**

Pursuant to 780 CMR 110.10, please file a Site Plan with the required construction documents. The Site Plan MUST show the total lot area (SF), as well as all setbacks and proposed lot coverage for all buildings on the property (in SF and as % of total lot area).



# SECTION 7 - USE GROUP AND CONSTRUCTION TYPE

USE GROUP (Check as applicable)						CONSTRUCTION TYPE								
A Assembly	<input type="checkbox"/>	A-1	<input type="checkbox"/>	A-2	<input type="checkbox"/>	A-3	<input type="checkbox"/>	A-4	<input type="checkbox"/>	A-5	<input type="checkbox"/>	1A	<input type="checkbox"/>	
B Business	<input type="checkbox"/>											1B	<input type="checkbox"/>	
E Educational	<input type="checkbox"/>											2A	<input type="checkbox"/>	
F Factory	<input type="checkbox"/>	F-1	<input type="checkbox"/>	F-2	<input type="checkbox"/>							2B	<input type="checkbox"/>	
H High Hazard	<input type="checkbox"/>	H-1	<input type="checkbox"/>	H-2	<input type="checkbox"/>	H-3	<input type="checkbox"/>	H-4	<input type="checkbox"/>	H-5	<input type="checkbox"/>	3A	<input type="checkbox"/>	
I Institutional	<input type="checkbox"/>	I-1	<input type="checkbox"/>	I-2	<input type="checkbox"/>	I-3	<input type="checkbox"/>						3B	<input type="checkbox"/>
M Mercantile	<input type="checkbox"/>											4	<input type="checkbox"/>	
R Residential	<input type="checkbox"/>	R-1	<input type="checkbox"/>	R-2	<input type="checkbox"/>	R-3	<input type="checkbox"/>						5A	<input type="checkbox"/>
S Storage	<input type="checkbox"/>	S-1	<input type="checkbox"/>	S-2	<input type="checkbox"/>							5B	<input type="checkbox"/>	
U Utility	<input type="checkbox"/>	Specify _____												
M Mixed Use	<input type="checkbox"/>	Specify _____												
S Special Use	<input type="checkbox"/>	Specify _____												

## FOR BUILDINGS UNDERGOING RENOVATIONS, ADDITIONS, AND/OR CHANGE IN USE

Existing Use Group: _____	Proposed Use Group: _____
Existing Hazard Index (780 CMR 34): _____	Proposed Hazard Index (780 CMR 34): _____

## SECTION 8 - ESTIMATED CONSTRUCTION COSTS --- Including Building, Electrical, Plumbing, Mechanical (HVAC), & Fire Protection Work

PLEASE ROUND TO  
NEAREST THOUSAND

\$ 3500.00

## SECTION 9 - APPLICATION DECLARATION

I (we) the undersigned, as permit Applicant(s), hereby declare that the statements and information on the foregoing application are true and accurate, to the best of my (our) knowledge and belief.

Signed under the pains and penalties of perjury.

Owner Signature \*

Date

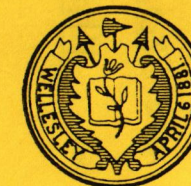
Construction Supervisor Signature (required if identified on front)

Date

\* If the owner has authorized an agent to act on his/her behalf, please include a signed authorization letter with this application.

For Office Use Only

APPLICATION # 201204658



## COMMERCIAL BUILDING PERMIT

199 WORCESTER ST.

Property (Number and Street)  
11/30/2012

Date Permit Granted

RW

Reviewed By

## Fees Collected:

Permit

Microfilming

Advertising

Cert. of Occ.

TOTAL

\$ 300 -